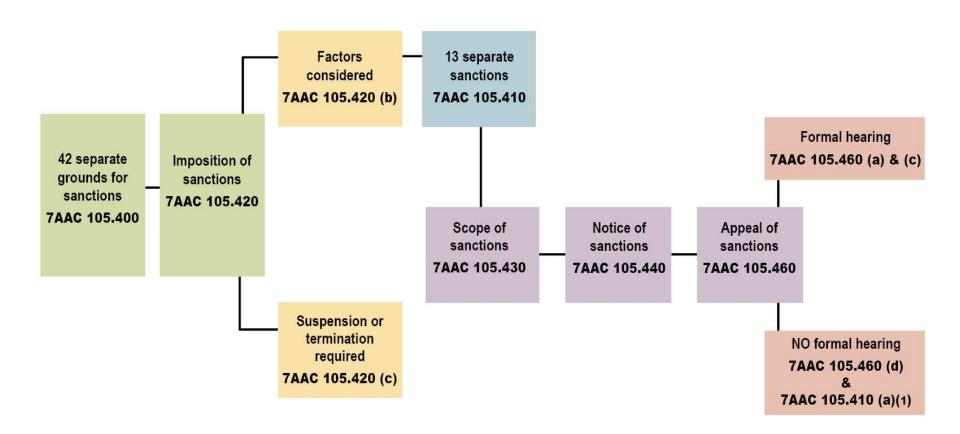
Overview of a Medicaid Fraud Case Medicaid Division Medicaid Consider sanction options including Notice to Division ensures Send notice division or Xerox Referral is Sanction recipients have recipients of of sanction to identifies a Generated Provider provider payment alternative provider potential provider suspension suspension providers (see page 2/3) fraud case termination NO Medicaid Program Integrity Referral is Referral is Does referral Overpayment Overpayment **DHSS** makes Payments to Notice to Alaska list Case is reviewed and YES notice drafted → received, logged in, prioritized → involve worked as an overpayment → credible provider are of excluded provider amount suspended in evaluated identified? providers is potential for and sent to allegation suspending for Fraud and assigned MMIS fraud? updated provider determination payment (see page 3/3) **Implications** Source of Fraud Cases NO YES NO Medicaid Fraud Control MFCU logs MFCU accepts Credible MFCU charges Medicaid Notice of referral case for YES Allegation YES provider YES conviction sent case investigation? meeting convicted of to OIG fraud DHHS Office of Inspector General OIG List of OIG receives OIG receives OIG receives excluded **OIG Referral** notice of notice of notice individuals and sanction conviction entities Other sources of Fraud Referrals Public or Recipient FBI Referral Medicaid Referral **Providers**

Overview of Medicaid Sanction Process



Overview of Medicaid Provider Audit / Overpayment

